S	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17/90	
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 11d	
	_		Detailed Summary Page	12 13a 13b 14 15	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)					
\rangle	Conyers for Congress				
۹.	Full Name (Last, First, Middle Initial) Armando Roche			Date of Receipt	
	Mailing Address 1910 Orient Rd.			03 09 2007	
	City	State Zip Code		Transaction ID: C3643465	
	Tampa	FL	33619	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		600.00	
	Name of Employer Roche Surety Inc.	Occupation CEO/Chairman		Limit Increased Due to Opponent's	
	Receipt For: 2008		Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
	X Primary General Other (specify) ▼	0 0	600.00		
 3.	Full Name (Last, First, Middle Initial) Alan Slomowitz			Date of Receipt	
	Mailing Address 1325 13th St., NW, Apt. 501			02 26 7 2007	
	City	State	Zip Code	Transaction ID: C3810485	
	Washington	DC	20005	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		500.00	
	Name of Employer Greenberg Traurig	Occupation	n		
		Attorney	Cycle-to-Date ▼	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
	Receipt For: 2008 X Primary General	LIECTION		1	
	Other (specify) ▼	0 0	500.00		
Э.	Full Name (Last, First, Middle Initial) Aaron Duncan			Date of Receipt	
	Mailing Address 17321 Jeff Davis Hwy. #371			02 20 7 2007	
	City	State	Zip Code	Transaction ID: C3642205	
	<u>Dumfires</u>	VA	22026	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		300.00	
	Name of Employer Chances Bail Bonds	Occupation Bail Ager		Limit Increased Due to Opponent's	
	Receipt For: 2008		Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)	
	X Primary General Other (specify) ▼	0 0	300.00		
SUBTOTAL of Receipts This Page (optional)					
T	OTAL This Period (last page this line number	only)			